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ATTENTION: Examiner Johnnie L. Smith
GROUP ART UNIT: 2881
FIRM/CO. NAME: United States Patent and Trademark Office
APPLICATION NO: 10/698,726
FAX NO: (703) 872-9306
FROM: Ashok K. Janah
DATE: November 1, 2004
AMAT REFERENCE NO: 008177 USA/DSM/ELK/JW

TOTAL NUMBER OF PAGES 17 (INCLUDING COVER PAGE)

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BUSINESS PHONE: (415) 538-1555 FACSIMILE NO: (415) 538-8380

MESSAGE:

Examiner Smith:

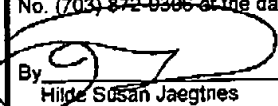

This communication is in response to the non-final Office Action mailed on June 30, 2004, and is being timely filed within four months thereof with a request for a one month extension of time.

Thank you,

Hilde Susan Jaegtnes

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Demos et al.		Group No: 2881	
Application No: 10/698,728 Confirmation No: 1583		Examiner: Johnnie L. Smith	
Filed: 10/30/2003		Attorney Docket No: 008177 USA/DSM/ELK/JW	
For: ELECTRON BEAM TREATMENT APPARATUS		November 1, 2004 San Francisco, CA 94107	
VIA FACSIMILE (703) 872-9306 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Extension of Term <input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136	
Papers Enclosed		Extension (Months)	Extension Fee
<input checked="" type="checkbox"/> Amendment and Marked Up Copy of Claims/Specification		<input checked="" type="checkbox"/> One Month	\$110.00
<input checked="" type="checkbox"/> Associate Power of Attorney by Assignee		<input type="checkbox"/> Two Months	\$430.00
<input type="checkbox"/> Drawings		<input type="checkbox"/> Three Months	\$980.00
<input type="checkbox"/> Supplemental Information Disclosure Statement		Total \$ 110.00	
<input type="checkbox"/> PTO-SB08 Form		<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.	
<input type="checkbox"/> Citations			
<input type="checkbox"/> Declaration/Affidavit			
<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Postcard for Return			
Fees for Extra Claims			
Amendment Fee Calculation			
	Claims remaining after amendment	Highest Number Previously Paid for	Number Extra
			Rate
			Large Entity
Total Claims	17	20	0
Independent Claims	3	3	0
Multiple Dependent Claims			\$300
Supplemental Information Disclosure Statement			\$180
			Total
			0
Fee Payment		Fee Deficiency	
Extension Fees	\$110.00	<input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258 and/or	
Fees for Extra Claims	\$0.00	<input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. 10-0258	
Total	\$110.00		
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00.		Please direct all telephone calls to: Ashok K. Janah at (415)538-1555	
<input checked="" type="checkbox"/> Please charge deposit account no. 10-0258 in the sum of \$110.00.		Please continue to send correspondence to:	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office via Fax No. (703) 872-9306 at the date shown below.		Applied Materials, Inc. Patent Department, M/S 2061 P.O. Box 450A Santa Clara, CA 95062	
By  Date November 1, 2004		Respectfully Submitted,  Date November 1, 2004	
		Ashok K. Janah Registration No. 37,487	

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